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APPLICATION NO. FILING DATE FERST NAMED INVENTOR ATTORNEY DOCKET NO. CONSTRMATION N. 10/697,560 10/31/2003 Thomas Grafenauer P27123 3411 TITLE OF INVENTION: PANEL AND PROCESS FOR PRODUCING A PANEL	United avelope csimile			
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/697,560 10/31/2903 Thomas Grafenauer P271/23 3411	's name)			
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10/697,560 10/31/2003 Thomas Grafenauer P27123 8411	(Date)			
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APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE	\neg			
nonprovisional NO \$1510 \$300 \$0 \$1810 11/30/2009				
EXAMINER ART UNIT CLASS-SUBCLASS				
FERGUSON, LAWRENCE D 1794 428-212000				
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
10/697,560	10/31/2003	Thomas Grafenauer	P27123	8411			
TITLE OF INVENTION: PANEL AND PROCESS FOR PRODUCING A BANEL							

APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE PEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 sn. \$1810 11/30/2009 EXAMINER ARTIMIT CLASS-SUBCLASS FERGUSON, LAWRENCE D 1794 428-212000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, 2 Greenblum & Bernstein P.L.C (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Kronotec AG Luzern Switzerland Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): ☑ Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Advance Order - # of Copies 10

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